## L14000192913

(Re	questor's Name)	- 40-00
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	<u> </u>
Certified Copies	_ Certificates	of Status
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ACCOUNT NO. : 12000000195
REFERENCE : 430791 4306525
AUTHORIZATION Spubble was
COST LIMIT : 25.00
ORDER DATE : December 22, 2014
ORDER TIME : 1:07 PM
ORDER NO. : 430791-005
CUSTOMER NO: 4306525
DOMESTIC AMENDMENT FILING
NAME: S & W APPAREL HOLDING, LLC
EFFECTIVE DATE:
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Courtney Williams EXT# 62935

EXAMINER'S INITIALS:

## **COVER LETTER**

TO: Registration Division of C	
S & W	APPAREL HOLDING, LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Articles	of Amendment and fee(s) are submitted for filing.
Please return all corres	spondence concerning this matter to the following:
	PETER VISALLI
	Name of Person
	SILLS CUMMIS & GROSS
	Finn/Company
	ONE RIVERFRONT PLAZA
	Address
	NEWARK, NJ 07102
	City/State and Zip Code
	PVISALLI@SILLSCUMMIS.COM
	E-mail address: (to be used for future annual report notification)
For further information	concerning this matter, please call:
PETER VISALLI	973 643-4386
Name	at () e of Person Area Code Daytime Telephone Number
Enclosed is a check for	the following amount:
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

S & W APPAREL HOLDING, LLC		
(Name of the Limited Liability Come (A Florida Limited	pany as it now appears on our records.) d Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Companies Florida document number L14000192913	ny were filed on DECEMBER 18, 2	2014 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
SWC APPAREL HOLDINGS, LLC		
The new name must be distinguishable and end with the words "Limited Lie	ability Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		14 SE 14
		ART C
Enter new mailing address, if applicable:		SER 2
(Mailing address MAY BE A POST OFFICE BOX)		F 8 11
		SA F. O
		A A G
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		er the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
<del></del>	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Authorized Member being added or removed from our records: MGR = Manager AMBR = Authorized Member <u>Title</u> Name Address Type of Action \_D Add \_\_\_\_ 🗆 Remove \_D Add □ Remove DEC 22 PHE L: LO □ Add □ Remove \_D Add \_\_\_\_ Remove \_\_\_\_ □ Remove

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or

D. If amending any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date the date this document is filed by the Florida Department	of receipt or filed date and cannot be more than 90 days after
Dated DECEMBER 22	2014
11. Win	
Signature of a mo	ember or authorized representative of a member
	Typed or printed name of signee

CRETARY OF ST LAHASSEE, FLO

14 DEC 22 PM 4: LO

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Filing Fee: \$25.00